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PTO/SB/22 (01-08)
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PE	ETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)
	FY 2008
	(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Docket Number (Optional)

3159-9230US

Examiner

Application Number 10/003,462

1643

Art Unit

December 6, 2001 Filed

A. Holleran

VACCINE COMPOSITION CONTAINING TRANSFORMING GROWTH FACTOR ALPHA (TGFALPHA). IT USE IN MALIGNANT DISEASES THERAPY

This is a request un-	der the provisions of 37 CFR 1.136(a) to ex	tend the period for filin	g a reply in the above identified	application.			
The requested exter	nsion and fee are as follows (check time per	riod desired and enter	the appropriate fee below):				
		<u>Fee</u>	Small Entity Fee				
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$			
	Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$			
	Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$ <u>1050.00</u>			
	Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$			
	Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$			
☐ Applicant claim	s small entity status. See 37 CFR 1.27.						
A check in the	amount of the fee is enclosed.	,					
☐ Payment by cre	edit card. Form PTO-2038 is attached.						
☐ The Director ha	as already been authorized to charge fees in	n this application to a D	eposit Account.				
☑ The Director is	hereby authorized to charge any fees which	h may be required, or o	redit any overpayment, to				
Deposit Account Number <u>20-1469</u> . I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
I am the	□ applicant/inventor.□ assignee of record of the entire interest	oct Soo 37 CER 3 71					
	Statement under 37 CFR 3.73(b)		TO/SB/96).				
	attorney or agent of record. Registra	ation Number					
•	☑ attorney or agent under 37 CFR 1.34	1.					
Registration number if acting under 37 CFR 1.34. <u>57,795</u> .							
X	18 Inthe		October 1, 2008				
Signature			Date 801-532-1922				
	d E. North Typed or printed name	<u> </u>	Telephone Number				
	f all the inventors or assignees of record of the nature is required, see below.	entire interest or their re	·	nit multiple forms			
☑ Total of 1 forms a	are submitted.						
NOTICE	OF EXPRESS MAILING						
Express Mail Mailing	Label Number: EV962552927US	_					
Date of Deposit with U	JSPS: October 1, 2008	_					

information is required to obtain or retain a benefit by the public which is liy is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and automitting the ing upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Ch strinent of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETEDFORMS TO THIS ADDRESS. SEND TO: Commissioner for the commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETEDFORMS TO THIS ADDRESS. SEND TO: Commissioner for the commerce of the commissioner for the commi

Robert J. Gueck

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PETITION FOR E	EXTENSION OF TIME UNDER 37 CF	Docket Number (Optional)					
	FY 2008	3159-9230US					
	nt to the Consolidated Appropriations Act, 20	511 1 2 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
Application Numb	per 10/003,462	Filed December 6, 2	1001				
For VACCINE COMPOSITION CONTAINING TRANSFORMING GROWTH FACTOR ALPHA (TGFALPHA). IT USE IN MALIGNANT DISEASES THERAPY							
Art Unit 1643		Examiner A. Hollerar	1				
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.							
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):							
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 □ Applicant claims small entity status. See 37 CFR 1.27. ☑ A check in the amount of the fee is enclosed. □ Payment by credit card. Form PTO-2038 is attached. □ The Director has already been authorized to charge fees in this application to a Deposit Account. ☑ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to □ Deposit Account Number 20-1469. I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the □ applicant/inventor. □ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). □ attorney or agent of record. Registration Number ☑ attorney or agent under 37 CFR 1.34. 							
Toda	Signature I E. North		October 1, 2008 Date 801-532-1922				
	Typed or printed name		Telephone Number				
NOTE: Signatures of if more than one sign	all the inventors or assignees of record of the elature is required, see below.	entire interest or their repre	esentative(s) are required. Sub	mit multiple forms			
▼ Total of 1 forms are submitted.							
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Date of Deposit with USPS: October 1, 2008							
Person making Deposit: Robert J. Gueck							